

Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

February 5, 2015

WRP Asia Pacific Sdn Bhd Ms. Sarala Devi Jayaraman Regulatory Affairs Manager Lot 1, Jalan 3, Kawasan Perusahaan Bandar Baru Salak Tinggi Sepang, Selangor Darul Ehsan Malaysia 43900

Re: K141982

Trade/Device Name: Dermagrip Powder Free Blue Nitrile Patient Examination Gloves

Tested for Use with Chemotherapy Drugs

Regulation Number: 21 CFR 880.6250

Regulation Name: Patient Examination Glove

Regulatory Class: I

Product Code: LZC, LZA Dated: December 23, 2014 Received: December 29, 2014

Dear Ms. Jayaraman:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Tejashri Purohit-Sheth, M.D. Clinical Deputy Director

Tejashri Purohit-Sheth, M.D. Clinical Deputy Director DAGRID/ODE/CDRH FOR

Erin I. Keith, M.S.
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Radiological Health

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017 See PRA Statement on last page.

510(k) Number <i>(if known)</i> K141982					
Device Name Dermagrip Powder Free Blue Nitrile Patient	Examination Gloves, Non-S	terile, Tested for use with Chemotherapy Drugs			
Indications for Use (Describe)		100			
A patient examination glove is a disposable of prevent contamination between patient and e		ourposes that is worn on the examiner's hand or finger to			
These gloves were tested for use with Chemo Gloves to Permeation by Chemotherapy Dru		1 D6978-05 Standard Practice for Assessment of Medica			
Chemotherapy Drug Permeation The following chemicals have been tested wi	ith these gloves.				
Chemotherapy Drug	Concentration	Breakthrough Detection Time in Minutes			
Flourouracil (Adrucil)	50.0mg/ml	> 240			
Etopside (Toposar)	20.0mg/ml	> 240			
Cyclophosphamide (Cytoxan)	20.0mg/ml	> 240			
*Carmustine (BCNU)	3.3mg/m1	15.0			
*Thiotepa	10.0mg/ml	2.0			
Paclitaxel (Taxol)	6.0mg/m1	> 240			
Doxorubicin Hydrochloride (Adriamycin)	2.0mg/ml	> 240			
Dacarbazine	10.0mg/ml	> 240			
Cisplatin	1.0mg/ml	> 240			
Ifosfamide	50.0mg/ml	> 240			
Mitoxantrone	2.0mg/ml	> 240			
Vincristine Sulfate	1.0mg/ml	> 240			
* Please note that the following drugs have e Carmustine (BCNU): 15 minutes and Thio	The state of the s	nes:			
Carmasine (BOIVO) : 15 minutes and 1mo	repar a minutes				

Type of Use (Select one or both, as applicable) Prescription Use (Part 21 CFR 801 Subpart D)

PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON A SEPARATE PAGE IF NEEDED.

FOR FDA USE ONLY

Concurrence of Center for Devices and Radiological Health (CDRH) (Signature)

This section applies only to requirements of the Paperwork Reduction Act of 1995.

DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF EMAIL ADDRESS BELOW.

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1.0 Submitter:

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Sepang, Selangor Darul Ehsan, MALAYSIA

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Date of Summary Prepared: 4 February 2015

2.0 Name of the device:

Dermagrip Powder Free Blue Nitrile Patient Examination Gloves, Non-Sterile,

Tested for use with Chemotherapy Drugs

Common Name: Exam Gloves

Classification Name: Patient Examination Gloves Specialty (21 CFR 880.6250 product code

LZC)

Patient Examination Gloves (21 CFR 880.6250 product code LZA)

3.0 Identification of The Legally Marketed Devices that equivalency is claimed:

	Predicate
Manufacturer	Kimberly-Clark Corporation
Device name	Kimberly-Clark *STERLING* Nitrile Powder-Free Exam Gloves with a Chemotherapy Drug Use Claim
510(k) Number	K081089
MDL	-
Regulatory Class	I
Product Code	LZC

4.0 Description of The Device:

Powder Free Blue Nitrile Patient Examination Glove, Non-Sterile meets all the requirements of ASTM standard D6319-10, D6978-05 and FDA 21 CFR 880.6250.

The powder free nitrile examination glove is manufactured from synthetic rubber latex. Inner surface of gloves undergo surface treatment process to produce a smooth surface that assists the user in donning the gloves with ease without using any lubricant such as powder on the glove surface. The glove is ambidextrous, i.e. can be worn on right hand or left hand. The physical properties of glove i.e. tensile strength meets ASTM standard D6319-10.

5.0 Intended Use of the Device:

A patient examination glove is a disposable device intended for medical purposes that is worn on the examiner's hand or finger to prevent contamination between patient and examiner.

6.0 Summary of the Technological Characteristics of the Device:

The Powder Free Blue Nitrile Examination Gloves, Non-Sterile are summarized with the following technological characteristics compared to ASTM D6319 or equivalent standards as shown in Table 1

Chemotherapy claim is similar to Predicate, which has a glove thickness below 0.10mm and is shorter than 270mm but compliant with the ASTM standards.

Table 1

CHARACTERISTICS	STANDARDS	DEVICE PERFORMANCE	
		Predicate	Current
Manufacturer(s)		Kimberly-Clark	WRP Asia Pacific Sdn
		Corporation	Bhd
510(k) Number		K081089	K141982
Dimensions	ASTM D6319-10	Conforms to ASTM	Min 240mm
		6319-00a	
Physical Properties	ASTM D6319-10	Meets	Meets
Thickness - Finger	ASTM D6319-10	0.07 - 0.10mm	0.07 - 0.10mm
- Palm		0.07 – 0.09mm	0.07 - 0.09mm
- Cuff		0.06 - 0.08mm	0.06 - 0.08mm
Powder Free	ASTM D6124-06	Meets	Meets
	(≤ 2 mg/glove)		

CHARACTERISTICS	STANDARDS	DEVICE PERFORMANCE	
		Predicate	Current
Chemotherapy Drug Permeation Test	ASTM D6978-05		
Test Chemotherapy Drug	Concentration	Minimum Breakthrough Detection Time (min)	
Flourouracil (Adrucil)	50.0mg/ml	> 240	> 240
Etopside (Toposar)	20.0mg/ml	> 240	> 240
Cyclophosphamide (Cytoxan)	20.0mg/ml	> 240	> 240
*Carmustine (BCNU)	3.3mg/ml	-	15.0
*Thiotepa	10.0mg/ml	54.2	2.0
Paclitaxel (Taxol)	6.0mg/ml	> 240	> 240
Doxorubicin Hydrochloride (Adriamycin)	2.0mg/ml	> 240	> 240
Dacarbazine	10.0mg/ml	> 240	> 240
Cisplatin	1.0mg/ml	> 240	> 240
Ifosfamide	50.0mg/ml	> 240	> 240
Mitoxantrone	2.0mg/ml	> 240	> 240
Vincristine Sulfate	1.0mg/ml	> 240	> 240
Warning Statement		-	* WARNING: Please note that the following drugs have extremely low permeation times: Carmustine (BCNU): 15 minutes and Thiotepa: 2 minutes.

CHARACTERISTICS	STANDARDS	DEVICE PERFORMANCE	
		Predicate	Current
Biocompatibility	Primary Skin Irritation	Passes	Passes
	ISO 10993- 10:2010(E) & Consumer Product Safety Commission, Tittle 16, Chapter II, Part 1500		Not a primary skin irritant under the conditions of the study.
	Dermal Sensitization - ISO 10993- 10:2010(E) & Consumer Product Safety Commission, Tittle 16, Chapter II, Part 1500.3(c)(4)	Passes	Passes Not a contact sensitizer under the conditions of the study.
Watertight (1000ml)	ASTM D5151-06	Passes	Passes
Intended use	- ACTM DG210, 10	A patient examination glove is a medical device intended for medical purposes that is worn on the examiner's hand to prevent contamination between patient and examiner.	A patient examination glove is a disposable device intended for medical purposes that is worn on the examiner's hand or finger to prevent contamination between patient and examiner.
Material	ASTM D6319-10	Nitrile	Nitrile
Color	-	Light Gray	Blue
Texture		Textured Fingertip	Finger textured
Size	Medical Glove Guidance Manual - Labeling	Extra Small Small Medium Large Extra Large	Extra Small Small Medium Large Extra Large
Single Use	Medical Glove Guidance Manual - Labeling	Single use	Single use

7.0 Substantial Equivalent Based on Assessment of Non-Clinical Performance Data

The performance test data of the non-clinical tests that support a determination of substantial equivalence is the same as mentioned immediately above (ASTM Requirements).

The device and the predicate share the same intended use, same material, same specifications for thickness and length, similar permeation rates for chemotherapy drugs, similar labeling according to the glove guidance, and same compliance with standards for physical properties, powder free, biocompatibility and water tightness. Thus, the device is substantial equivalent to the predicate.

8.0 Substantial Equivalent Based on Assessment of Clinical Performance Data

Not applicable - Clinical data is not needed for gloves or for most devices cleared by the 510(k) process.

9.0 Conclusion

Based on intended uses, technological characteristics and non-clinical performance data, the subject device K141982 is substantially equivalent to the predicate device K081089.